

Exhibit C

CITY OF NEW ORLEANS
STORAGE OF PERSONAL BELONGINGS

NAME: _____ DATE: _____

PHONE NUMBER OR CONTACT INFORMATION: _____

DESCRIPTION OF ITEM(S) TO BE STORED:

THE CITY OF NEW ORLEANS (CITY) ONLY ACCEPTS PORTABLE ITEMS THAT ARE ABLE TO BE SEALED IN THE PROVIDED PLASTIC BAGS TO BE STORED (SUCH AS TENTS, FOLDING CHAIRS, ETC.). THESE ITEMS MAY NOT HAVE SIGNS OF INFESTATION, INCLUDING BUT NOT LIMITED TO BEDBUGS, FLEAS AND RODENTS. BY SIGNING THIS FORM, I UNDERSTAND THAT THE CITY IS NOT RESPONSIBLE FOR ANY DAMAGES THAT MAY OCCUR TO THE ITEM(S) LISTED ABOVE AND THAT IF I HAVE NOT RETURNED TO CLAIM MY ITEMS WITHIN 90 DAYS, THEY WILL BE DISCARDED.

SIGNATURE: _____

FOR OFFICIAL USE ONLY

ITEM NUMBER: _____ DATE TO BE DISCARDED: _____

COPY TO BE TAPED TO STORED ITEM(S)

CITY OF NEW ORLEANS
STORAGE OF PERSONAL BELONGINGS

NAME: _____ DATE: _____

PHONE NUMBER OR CONTACT INFORMATION: _____

DESCRIPTION OF ITEM(S) TO BE STORED:

THE CITY OF NEW ORLEANS (CITY) ONLY ACCEPTS PORTABLE ITEMS THAT ARE ABLE TO BE SEALED IN THE PROVIDED PLASTIC BAGS TO BE STORED (SUCH AS TENTS, FOLDING CHAIRS, ETC.). THESE ITEMS MAY NOT HAVE SIGNS OF INFESTATION INCLUDING BUT NOT LIMITED TO BEDBUGS, FLEAS AND RODENTS. BY SIGNING THIS FORM, I UNDERSTAND THAT THE CITY IS NOT RESPONSIBLE FOR ANY DAMAGES THAT MAY OCCUR TO THE ITEM(S) LISTED ABOVE AND THAT IF I HAVE NOT RETURNED TO CLAIM MY ITEMS WITHIN 90 DAYS THEY WILL BE DISCARDED.

SIGNATURE: _____

FOR OFFICIAL USE ONLY

ITEM NUMBER: _____ DATE TO BE DISCARDED: _____

COPY TO BE RETAINED IN THE OFFICE OF COMMUNITY DEVELOPMENT

CITY OF NEW ORLEANS
STORAGE OF PERSONAL BELONGINGS

NAME: _____ DATE: _____

PHONE NUMBER OR CONTACT INFORMATION: _____

DESCRIPTION OF ITEM(S) TO BE STORED:

THE CITY OF NEW ORLEANS (CITY) ONLY ACCEPTS PORTABLE ITEMS THAT ARE ABLE TO BE SEALED IN THE PROVIDED PLASTIC BAGS TO BE STORED (SUCH AS TENTS, FOLDING CHAIRS, ETC.). THESE ITEMS MAY NOT HAVE SIGNS OF INFESTATION INCLUDING BUT NOT LIMITED TO BEDBUGS, FLEAS AND RODENTS. BY SIGNING THIS FORM, I UNDERSTAND THAT THE CITY IS NOT RESPONSIBLE FOR ANY DAMAGES THAT MAY OCCUR TO THE ITEM(S) LISTED ABOVE AND THAT IF I HAVE NOT RETURNED TO CLAIM MY ITEMS WITHIN 90 DAYS THEY WILL BE DISCARDED.

SIGNATURE: _____

FOR OFFICIAL USE ONLY

ITEM NUMBER: _____ DATE TO BE DISCARDED: _____

PROCESS FOR PICKING UP STORED ITEMS:

1. CALL 504-658-4205 MONDAY THROUGH THURSDAY FROM 8AM TO 5PM AND PROVIDE THE NAME AND ITEM NUMBER LISTED ON THIS RECEIPT.
2. THE ITEM(S) WILL THEN BE AVAILABLE FOR PICK UP ON THE FRIDAY OF THAT WEEK AT THE OFFICE OF COMMUNITY DEVELOPMENT ON THE 10TH FLOOR OF 1340 POYDRAS STREET NEW ORLEANS, LA 70112 FROM 8AM-5PM.